

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------------|-----------------|
| FEE DETERMINATION | <i>PA</i> | <i>70591</i> | <i>9/21</i> |
| O.I.P.E. CLASSIFIER | <i>PA</i> | | <i>5/12/10</i> |
| FORMALITY REVIEW | <i>PA</i> | <i>75353</i> | <i>10/30/10</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | |
| 2 | ✓ | ✓ | |
| 3 | ✓ | ✓ | |
| 4 | ✓ | ✓ | |
| 5 | ✓ | ✓ | |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
| 8 | ✓ | ✓ | |
| 9 | N | N | |
| 10 | ✓ | ✓ | |
| 11 | ✓ | ✓ | |
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| 24 | ✓ | ✓ | |
| 25 | ✓ | ✓ | |
| 26 | ✓ | ✓ | |
| 27 | N | N | |
| 28 | N | N | |
| 29 | N | N | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)